



Mail Stop RCE TRANSMITTAL FORM <i>(To be used for all correspondence after initial filing)</i>		Application Number	09/473,196
		Filing Date	December 13, 1999
		Confirmation Number	9700
		Inventor(s)	SANDERS
		Group Art Unit	3738
Express Mail Label No.: EL 997387474 US		Examiner	Isabella, D.
Total Number of Pages in This Submission:	12	Attorney Docket No.	88-01 C2 D1 C1 RE

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <i>(submit in duplicate)</i>	<input type="checkbox"/> Assignment Papers	<input type="checkbox"/> Issue fee Transmittal Form PTOL-85(b) + (c) and Cover Sheet
<input checked="" type="checkbox"/> Fee Attached \$ 1,720.00	<input type="checkbox"/> Cover Sheet	<input type="checkbox"/> After Allowance Communication to Group
Check No.: 312708	<input type="checkbox"/> Drawing Change Authorization Request and Amended Figure(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Request for Return of PTO-1449 Forms	<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to the Commissioner	<input checked="" type="checkbox"/> Request for Continued Examination (RCE)
<input type="checkbox"/> Affidavits / Declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Request Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Address	<input type="checkbox"/> Small Entity Statement
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer(s)	<input type="checkbox"/> Request for Refund
<input type="checkbox"/> Form PTO-1449	<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Response to Missing Parts / Incomplete Application
<input type="checkbox"/> Cited References	<input checked="" type="checkbox"/> Certificate of Mailing by Express Mail	
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<input type="checkbox"/> Drawing(s): Number of Pages _____ Number of Figs. _____ and cover sheet <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input type="checkbox"/> Other Enclosure(s): _____	

Current Due Date: July 26, 2004 (three months extended)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

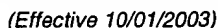
Individual and Company	Michael W. Haas, Reg. No. 35,174 RESPIRONICS, Inc., 1010 Murry Ridge Lane, Murrysville PA, 15668
Signature	<i>Michael W. Haas</i>
Date	July 23, 2004

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First Named Inventor	SANDERS
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Examiner's Name	Isabella, D.
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